Major Donor and			WINDON BONON	COMMITTEE STATEMENT		
Independent Expenditure Comm Campaign Statement (Government Code Sections 84200-84216.5)	or print in ink.	Date Stamp	CALIFORNIA FORM	461		
	Statement covers period	Date of election if applicable:		1/4		
Amendment	from07/01/2017	(Month, Day,Year)		For Official U	se Only	
SEE INSTRUCTIONS ON REVERSE	through12/31/2017					
1. Name and Address Of Filer		3. Summary				
NAME OF FILER (Include name(s) of all affiliated entities whose contril PRIME HEALTHCARE SERVICES,INC.	outions are included in this statement.)	(Amounts may be rounded to when the contact of \$10 (including loans) of \$10 (including loans) (including loans)	ributions 00 or more			
MAILING ADDRESS	(NO. AND STREET)	made this period. (Par	t 5.)	\$ —	36500.00	
CITY	STATE ZIP CODE	2. Unitemized expenditur contributions (including \$100 made this period	g loans) under	\$ —	0.00	
ONTARIO RESPONSIBLE OFFICER	CA 91761 AREA CODE/DAYTIME PHONE	3. Total expenditures and			00500 00	
(If filer is other than an individual)		made this period. (Add	,	SUBTOTAL \$ —	36500.00	
Fredrick Ortega		4. Total expenditures and made from prior staten				
2. Nature and Interests of Filer (Cor		amount from Line 5 of	,			
A FILER THAT IS AN INDIVIDUAL MUST LIST THE NA OF EMPLOYER OR, IF SELF-EMPLOYED, THE NAME	ME, ADDRESS, AND BUSINESS INTERESTS , ADDRESS, AND NATURE OF THE BUSINESS	filed. If this is the first			34400.00	
NAME OF EMPLOYER/BUSINESS	BUSINESS INTERESTS	the calendar year, enter		\$ —	04400.00	
		5. Total expenditures and (including loans) made				
ADDRESS OF EMPLOYER/BUSINESS		January 1 of the currer (Add Lines 3 + 4.)	nt calendar year.	TOTAL \$	70900.00	
A FILER THAT IS A BUSINESS ENTITY MUST DESCR	IBE THE BUSINESS ACTIVITY IN WHICH IT IS	4. Verification				
Healthcare A FILER THAT IS AN ASSOCIATION MUST PROVIDE	A SPECIFIC DESCRIPTION OF ITS INTERESTS	I have used all reasonable reviewed the statement ar contained herein is true ar the laws of the State of Ca	nd to the best of my kind complete. I certify	nowledge the inforn under penalty of p	nation erjury under	
A FILER THAT IS NOT AN INDIVIDUAL, BUSINESS EN COMMON ECONOMIC INTEREST OF THE GROUP OF		Executed on		Ortega IGNATURE OF INDIVIDUAL DO IBLE OFFICER IF OTHER THAI		

Major Donor and Independent Expenditure Committee Campaign Statement

Type or print in ink.
Amounts may be rounded to whole dollars.

INDEPENDENT EXPENDITURE COMMITTEE AND
MAJOR DONOR COMMITTEE STATEMENT

Statem	nent covers period 07/01/2017	CALIFORNIA FORM	461
through	12/31/2017	2/4	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

PRIME HEALTHCARE SERVICES, INC.

5. Contributions (Including Loans, Forgiveness of Loans, and Loan Guarantees) and Expenditures Made

(If more space is needed, use additional copies of this page for continuation sheets.)

DATE	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TYPE OF PAYMENT	DESCRIPTION OF PAYMENT (IF OTHER THAN MONETARY CONTRIBUTION OR LOAN)	CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE	AMOUNT THIS PERIOD	CUMULATIVE AMOUNT RELATIVE TO THIS CANDIDATE, MEASURE, OR COMMITTEE
07/12/2017	Jay Obernolte for Assembly 2018 Sacramento CA 95814 ID: 1392884 Reference No:	Monetary Contribution Loan Non-Monetary Contribution Independent Expenditure		Jay Obernolte State Assembly Person Assembly District NO: 33 ☐ Support ☐ Oppose	1500.00	\$
07/12/2017	Janet Nguyen for Senate 2018 Garden Grove CA 92840 ID: 1373835 Reference No:	Monetary Contribution Loan Non-Monetary Contribution Independent Expenditure		Janet Nguyen State Senator Senate District NO: 34 ☐ Support ☐ Oppose	2500.00	\$ 2500.00 Other \$ 0.00
08/17/2017	Wilk for Senate 2020 San Diego CA 92119 ID: 1392822 Reference No:	Monetary Contribution Loan Non-Monetary Contribution Independent Expenditure		Scott Wilk State Senator Senate District NO: 21 Support Oppose	2000.00	\$ 2000.00 Other \$ 0.00
08/10/2017	Paul Leon for Mayor 2014 Ontario CA 91762 ID: 1275013 Reference No:	Monetary Contribution Loan Non-Monetary Contribution Independent Expenditure		Paul Leon Other Mayor City Ontario Ontario NO: Support Oppose	2500.00	\$ 2500.00 Other \$ 0.00
				SUBTOTAL \$		

FPPC From 461 (8/99)

For Technical Assistance: 916/322-5660

Major Donor and Independent Expenditure Committee Campaign Statement

Type or print in ink.
Amounts may be rounded to whole dollars.

INDEPENDENT EXPENDITURE COMMITTEE AND
MAJOR DONOR COMMITTEE STATEMENT

Statement covers period		CALIFORNIA	161
from	07/01/2017	FORM	401
4b.u.a.v.aub	12/31/2017	3/4	
through	:=:0::,=0::]	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

PRIME HEALTHCARE SERVICES, INC.

5. Contributions (Including Loans, Forgiveness of Loans, and Loan Guarantees) and Expenditures Made

(If more space is needed, use additional copies of this page for continuation sheets.)

DATE	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TYPE OF PAYMENT	DESCRIPTION OF PAYMENT (IF OTHER THAN MONETARY CONTRIBUTION OR LOAN)	CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE	AMOUNT THIS PERIOD	CUMULATIVE AMOUNT RELATIVE TO THIS CANDIDATE, MEASURE, OR COMMITTEE
08/10/2017	Bob Dutton for Assessor-Recorder 2018 Rancho Cucamonga CA 91737 ID: 1386393 Reference No:	Monetary Contribution Loan Non-Monetary Contribution Independent Expenditure		Bob Dutton Other Assessor-Recorder County San Bernardino San Bernardino NO: X Support	4000.00	\$ 4000.00 Other \$ 0.00
08/30/2017	Dan Flores for Supervisor 2020 Oakdale CA 95361 ID: 1387074 Reference No:	Monetary Contribution Loan Non-Monetary Contribution Independent Expenditure		Dan Flores Other County Supervisor County San Bernardino San Bernardino NO: ☐ Support ☐ Oppose	1500.00	\$ Calendar Year \$ 2000.00 Other \$ 0.00
09/28/2017	Harry Sidhu for Mayor 2018 Anaheim CA 92817 ID: 1397441 Reference No:	Monetary Contribution Loan Non-Monetary Contribution Independent Expenditure		Harry Sidhu Other Mayor City Anaheim Anaheim NO: Support Oppose	2000.00	\$ 2000.00 Other \$ 0.00
11/09/2017	Russ Blewett for City Council 2018 Hesperia CA 92345 ID: 1327627 Reference No:	Monetary Contribution Loan Non-Monetary Contribution Independent Expenditure		Russ Blewett Other City Council City Hesperia Hesperia NO: X Support Oppose	500.00	\$ 500.00 Other \$ 0.00
SUBTOTAL \$						

FPPC From 461 (8/99)

For Technical Assistance: 916/322-5660

Major Donor and Independent Expenditure Committee Campaign Statement

Type or print in ink.
Amounts may be rounded to whole dollars.

INDEPENDENT EXPENDITURE COMMITTEE AND
MAJOR DONOR COMMITTEE STATEMENT

Statement covers period		CALIFORNIA	461
from	07/01/2017	FORM	401
4b.co.cab	12/31/2017	4/4	
through	12/01/2011	"'	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

PRIME HEALTHCARE SERVICES, INC.

(If more space is needed, use additional copies of this page for continuation sheets.)

DATE	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TYPE OF PAYMENT	DESCRIPTION OF PAYMENT (IF OTHER THAN MONETARY CONTRIBUTION OR LOAN)	CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE	AMOUNT THIS PERIOD	CUMULATIVE AMOUNT RELATIVE TO THIS CANDIDATE, MEASURE, OR COMMITTEE
08/10/2017	CHPAC Sacramento CA 95814 ID: 790773 Reference No:	Monetary Contribution Loan Non-Monetary Contribution Independent Expenditure		NO: Support Dppose	20000.00	\$ 20000.00 Other \$ 0.00

SUBTOTAL \$ 36500.00